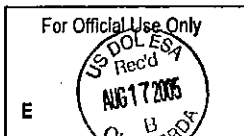


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- 18028	2. Fiscal Year Covered From: 1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing. Name Gary H Mullins P.O. Box, Bldg., Room No., if any Street 100 Indiana Avenue N.W. City Washington State District of Columbia ZIP Code +4 20001	4. Name, file number, and address of labor organization. Name National Association of Letter Carriers Labor Organization File Number 000-509 P.O. Box, Building and Room Number, if any Street 100 Indiana Avenue, N.W. City Washington State District of Columbia ZIP Code +4 20001
5. Position in labor organization. Vice President	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Gary H Mullins

On

08-12-05 202-662-2846

Date

Telephone Number

Name of Person Filing Gary Mullins

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Peake Delancey Printers

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2500 Schuster Drive

City Cheverly

State Maryland

ZIP Code + 4 20781

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Peake Delancey is one of the printing companies used by the NALC to do our printing.

11.b. Approximate dollar value of such dealing.

\$2,800,000

12.a. Nature of interest held or income received.

Received at home from Delancey during the year gift packages of such items as steak filets, crab cakes, fruit, wine, cheese, and ham.

Received from Delancey printed Christmas cards for personal use.

12.b. Amount.

\$1,255